Case 2:25-cv-00157-ES-JSA Document 1-13 Filed 01/07/25 Page 1 of 4 PageID: 155

## **Exhibit** L

## **UCC FINANCING STATEMENT AMENDMENT**

**FOLLOW INSTRUCTIONS** A. NAME & PHONE OF CONTACT AT FILER (optional)

MCCOY & ORTA, PC	4052360003	Denarta	ment of	the Treasury	
B. E-MAIL CONTACT AT FILER (optional)		Division of Re			cvices
kkeefe@mccoy-orta.com			UCC Sec	-	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)		1	File	ed	
MCCOY & ORTA, PC		Fili	ng Numbe	r:53123 <b>49</b> 3	
100 N. Broadway	•	0.	3/05/19 :	3:47:30	
26th floor			3,00,13	.5.17.50	
Oklahoma City, OK 73102					
US					
				R FILING OFFICE USE	
1a. INITIAL FINANCING STATEMENT FILE NUMBER 53123493		(or recorded) in the REA	AL ESTATE F		•
				n UCC3Ad) <u>and</u> provide Deb	
TERMINATION: Effectiveness of the Financing Statement is Statement	dentified above is terminated	with respect to the security inter	rest(s) of Sec	ured Party authorizing th	s Termination
3. X ASSIGNMENT (tull or partial): Provide name of Assignee in For partial assignment, complete items 7 and 9 <u>and</u> also indic			e of Assignor i	n item 9	
4. CONTINUATION: Effectiveness of the Financing Statemen continued for the additional period provided by applicable law		t to the security interest(s) of Se	ecured Party	authorizing this Continua	tion Statement is
5. PARTY INFORMATION CHANGE:					
	ND Check one of these three b				
This Change affects Debtor or Secured Party of record	CHANGE name and/or item 6a or 6b; and item	address: Complete 7a or 7b and item 7c ADD no	ame: Complet 'b, <u>and</u> item 7c	e item DELETE name to be deleted in	: Give record name i item 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party Info				<b>_</b> _	
6a. ORGANIZATION'S NAME					
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSO	NAL NAME	ADDITION	IAL NAME(S)/INITIAL(S)	SUFFIX
<ol> <li>CHANGED OR ADDED INFORMATION: Complete for Assignment 7a. ORGANIZATION'S NAME</li> </ol>	or Party Information Change - provide	only one name (7a or 7b) (use exact, full	name; do not om	t, modify, or abbreviate any part	of the Debtor's name)
WELLS FARGO BANK, NAT	ידראואד אפפו	$\gamma_{C}$ $\uparrow$ $\gamma$ $\uparrow$	פידי סי	     CTEE *	
OR 75. INDIVIDUAL'S SURNAME	TONAL ASSO	JCIAIION, A	72 11	03155	
7D. INDIVIDUALS SURINAIVIE					
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUALS FIRST FERSONAL NAME					
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					Telleely
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					SUFFIX
	Іспу		ISTATE	POSTAL CODE	
individual's additional name(s)/initial(s)  7c. Mailing address 9062 Old Annapolis Road	СПТУ	nhia		POSTAL CODE	COUNTRY
7c. MAILING ADDRESS 9062 Old Annapolis Road	Colur		MD	21045	COUNTRY
7c. MAILING ADDRESS 9062 Old Annapolis Road  8. X COLLATERAL CHANGE: Also check one of these four boxe	Colur		MD	21045	COUNTRY
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7c. MAILING ADDRESS 9062 Old Annapolis Road  8. X COLLATERAL CHANGE: Also check one of these four boxe Indicate collateral:	es: ADD collateral	DELETE collateral	MD RESTATE CO	21045 vered collateral	COUNTRY US  ASSIGN collateral
7c. MAILING ADDRESS 9062 Old Annapolis Road  8. X COLLATERAL CHANGE: Also check one of these four boxe Indicate collateral:  9. NAME of SECURED PARTY of RECORD AUTHORIZE If this is an Amendment authorized by a DEBTOR, check here	es: ADD collateral	DELETE collateral  Provide only <u>one</u> name (9a or 9b)	MD RESTATE CO	21045 vered collateral	COUNTRY US  ASSIGN collateral
7c. MAILING ADDRESS 9062 Old Annapolis Road  8. X COLLATERAL CHANGE: Also check one of these four boxe Indicate collateral:  9. NAME of SECURED PARTY of RECORD AUTHORIZ If this is an Amendment authorized by a DEBTOR, check here 9a. ORGANIZATION'S NAME	es: ADD collateral  ING THIS AMENDMENT: and provide name of authorizing	Provide only <u>one</u> name (9a or 9b)	MD RESTATE CO	21045 vered collateral	COUNTRY US  ASSIGN collateral
7c. MAILING ADDRESS 9062 Old Annapolis Road  8. X COLLATERAL CHANGE: Also check one of these four boxe Indicate collateral:  9. NAME of SECURED PARTY of RECORD AUTHORIZE If this is an Amendment authorized by a DEBTOR, check here	es: ADD collateral  ING THIS AMENDMENT: and provide name of authorizing	Provide only <u>one</u> name (9a or 9b)	MD RESTATE or	21045 vered collateral	COUNTRY US  ASSIGN collateral

10. OPTIONAL FILER REFERENCE DATA:

M&O Ref.: 7541.126 424-428 Park Avenue (Loan No. 503001198) FILE WITH NJ DEPARTMENT OF TREASURY/COMMERCIAL RECORDING

## **UCC FINANCING STATEMENT AMENDMENT ADDENDUM**

11. INITIAL FINANCING STATEMENT FILE NUMBER: Same	as item 1a on Amendment form		
53123493		State of New Jersey Department of the Treasury	
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: S	ame as item 9 on Amendment form	Division of Revenue & Enterprise Serv	ices
12a. ORGANIZATION'S NAME		UCC Section	
FEDERAL HOME LOAN MORTG	SAGE CORPORATION	Filed	
		Filing Number: 53123493	
OR 12b. INDIVIDUAL'S SURNAME		03/05/19 13:47:30	
FIRST PERSONAL NAME			
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX		
ASSITIONE WINE(G)	55111X	THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY	<b>,</b>
13. Name of DEBTOR on related financing statement (Name o	f a current Debtor of record required for indexing		
one Debtor name (13a or 13b) (use exact, full name; do not omit, i			
13a. ORGANIZATION'S NAME MICH 424 PARK LLC			
OR 13b. INDIVIDUAL'S SURNAME	IFIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S) SUFFIX	
13D. INDIVIDUAL 3 SURIVAIVIL	I INST PERSONAL NAME	ADDITIONAL NAME(S)/INTIAL(S)	
L 14. ADDITIONAL SPACE FOR ITEM 8 (Collateral):			
15. This FINANCING STATEMENT AMENDMENT:	17. Description	of real estate:	
15. This FINANCING STATEMENT AMENDMENT:  Covers timber to be cut covers as-extracted collateral	17. Description  ☐ is tiled as a fixture filing	of real estate:	
covers timber to be cut covers as-extracted collateral  16. Name and address of a RECORD OWNER of real estate described	is filed as a fixture filing	of real estate:	
covers timber to be cut covers as-extracted collateral	is filed as a fixture filing	of real estate:	
covers timber to be cut covers as-extracted collateral  16. Name and address of a RECORD OWNER of real estate described	is filed as a fixture filing	of real estate:	
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covers timber to be cut covers as-extracted collateral  16. Name and address of a RECORD OWNER of real estate described	is filed as a fixture filing	of real estate:	

18. MISCELLANEOUS:

The filer attests that the Collateral set forth in this Financing Statement is within the scope of the New Jersey Uniform Commercial Code-Secured Transactions pursuant to N.J.S.A. 12A:9-102 and N.J.S.A. 12A:9-109, as required by N.J.S.A. 12A:9-502

Miscellaneous Description Continued Filing Number:53123493

\* FOR THE REGISTERED HOLDERS OF AMHERST PIERPONT COMMERCIAL MORTGAGE SECURITIES LLC, MULTIFAMILY MORTGAGE PASS-THROUGH CERTIFICATES, SERIES 2019-SB59

Assignment: 3/3